

County: Milwaukee
 MILW. PROTESTANT HOME/AGED HEALTH CENTER
 2449 NORTH DOWNER AVENUE

Facility ID: P090

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MILWAUKEE 53211 Phone: (414) 332-8610

Operated from 1/1 To 12/31 Days of Operation: 366

Operate in Conjunction with Hospital? No

Number of Beds Set Up and Staffed (12/31/00): 47

Total Licensed Bed Capacity (12/31/00): 47

Number of Residents on 12/31/00: 34

Ownership:

Highest Level License:

Operate in Conjunction with CBRF? No

Title 18 (Medicare) Certified? No

Average Daily Census: 37

Nonprofit Church-Related

Skilled

Services Provided to Non-Residents			Age, Sex, and Primary Diagnosis of Residents (12/31/00)				Length of Stay (12/31/00)		%
-----	-----	-----	-----	-----	-----	-----	-----	-----	-----
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year	23.5		
Supp. Home Care-Personal Care	No	-----	-----	-----	-----	1 - 4 Years	58.8		
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	0.0	More Than 4 Years	17.6		
Day Services	No	Mental Illness (Org./Psy)	35.3	65 - 74	0.0		-----		
Respite Care	No	Mental Illness (Other)	17.6	75 - 84	8.8		100.0		
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	58.8	*****			
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	32.4	Full-Time Equivalent			
Congregate Meals	No	Cancer	14.7		-----	Nursing Staff per 100 Residents			
Home Delivered Meals	No	Fractures	0.0		100.0	(12/31/00)			
Other Meals	No	Cardiovascular	26.5	65 & Over	100.0	-----			
Transportation	No	Cerebrovascular	0.0	-----	-----	RNs	9.6		
Referral Service	Yes	Diabetes	5.9	Sex	%	LPNs	7.4		
Other Services	No	Respiratory	0.0	-----	-----	Nursing Assistants			
Provide Day Programming for		Other Medical Conditions	0.0	Male	5.9	Aides & Orderlies			
Mentally Ill	No	-----	-----	Female	94.1				
Provide Day Programming for		100.0	-----	-----	-----				
Developmentally Disabled	No				100.0				

Method of Reimbursement

Level of Care	Medicare (Title 18)			Medicaid (Title 19)			Other			Private Pay			Managed Care				Percent Of All Residents
	No.	%	Per Diem	No.	%	Per Diem	No.	%	Per Diem	No.	%	Per Diem	No.	%	Per Diem	Total	
			Rate			Rate			Rate			Rate			Rate		
Int. Skilled Care	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Skilled Care	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Intermediate	---	---	---	0	0.0	\$0.00	0	0.0	\$0.00	34	100.0	\$164.00	0	0.0	\$0.00	34	100.0%
Limited Care	---	---	---	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Personal Care	---	---	---	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Residential Care	---	---	---	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Dev. Disabled	---	---	---	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Traumatic Brain Inj.	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Ventilator-Dependent	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Total	0	0.0		0	0.0		0	0.0		34	100.0		0	0.0		34	100.0%

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/00				
				% Needing Assistance of	% Totally Dependent	Total Number of Residents
Percent Admissions from		Activities of	% Independent	One Or Two Staff		
Private Home/No Home Health	6.1	Daily Living (ADL)				
Private Home/With Home Health	6.1	Bathing	0.0	70.6	29.4	34
Other Nursing Homes	15.2	Dressing	50.0	23.5	26.5	34
Acute Care Hospitals	36.4	Transferring	67.6	11.8	20.6	34
Psych. Hosp. -MR/DD Facilities	6.1	Toilet Use	61.8	17.6	20.6	34
Rehabilitation Hospitals	0.0	Eating	67.6	23.5	8.8	34
Other Locations	30.3	*****				
Total Number of Admissions	33	Continence	%	Special Treatments		%
Percent Discharges To:		Indwelling Or External Catheter	2.9	Receiving Respiratory Care		8.8
Private Home/No Home Health	0.0	Occ/Freq. Incontinent of Bladder	38.2	Receiving Tracheostomy Care		0.0
Private Home/With Home Health	2.7	Occ/Freq. Incontinent of Bowel	8.8	Receiving Suctioning		0.0
Other Nursing Homes	2.7			Receiving Ostomy Care		0.0
Acute Care Hospitals	32.4	Mobility		Receiving Tube Feeding		0.0
Psych. Hosp. -MR/DD Facilities	5.4	Physically Restrained	0.0	Receiving Mechanically Altered Diets		23.5
Rehabilitation Hospitals	0.0					
Other Locations	27.0	Skin Care		Other Resident Characteristics		
Deaths	29.7	With Pressure Sores	0.0	Have Advance Directives		100.0
Total Number of Discharges		With Rashes	0.0	Medications		
(Including Deaths)	37			Receiving Psychoactive Drugs		0.0

Selected Statistics: This Facility Compared to All Similar Milwaukee Metropolitan Area Facilities & Compared to All Facilities

	Ownership:			Bed Size:		Licensure:		All	
	This Facility	Nonprofit	Peer Group	Under 50	Peer Group	Skilled	Peer Group	Facilities	
	%	%	Ratio	%	Ratio	%	Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	78.7	91.5	0.86	74.2	1.06	81.9	0.96	84.5	0.93
Current Residents from In-County	100	87.4	1.14	85.6	1.17	85.6	1.17	77.5	1.29
Admissions from In-County, Still Residing	24.2	27.5	0.88	30.4	0.80	23.4	1.03	21.5	1.13
Admissions/Average Daily Census	89.2	115.2	0.77	95.0	0.94	138.2	0.65	124.3	0.72
Discharges/Average Daily Census	100.0	118.5	0.84	103.0	0.97	139.8	0.72	126.1	0.79
Discharges To Private Residence/Average Daily Census	2.7	35.5	0.08	8.0	0.34	48.1	0.06	49.9	0.05
Residents Receiving Skilled Care	0.0	89.5	0.00	73.4	0.00	89.7	0.00	83.3	0.00
Residents Aged 65 and Older	100	96.9	1.03	96.3	1.04	92.1	1.09	87.7	1.14
Title 19 (Medicaid) Funded Residents	0.0	57.6	0.00	50.5	0.00	65.5	0.00	69.0	0.00
Private Pay Funded Residents	100	35.4	2.82	45.2	2.21	24.5	4.09	22.6	4.43
Developmentally Disabled Residents	0.0	0.4	0.00	0.0	0.00	0.9	0.00	7.6	0.00
Mentally Ill Residents	52.9	30.8	1.72	52.7	1.01	31.5	1.68	33.3	1.59
General Medical Service Residents	0.0	24.9	0.00	8.0	0.00	21.6	0.00	18.4	0.00
Impaired ADL (Mean)	35.9	50.5	0.71	51.9	0.69	50.5	0.71	49.4	0.73
Psychological Problems	0.0	45.5	0.00	36.7	0.00	49.2	0.00	50.1	0.00
Nursing Care Required (Mean)	4.0	6.6	0.62	6.4	0.63	7.0	0.57	7.2	0.57